

KITT-11-10



STATE OF WASHINGTON
**APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT**

RECEIVED
SEP 29 2011

For filing with the Department of Ecology or with County Conservancy Boards DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF
ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.)

- ☒ Change purpose(s) of use
- ☐ Add purpose(s) of use
- ☐ Change point(s) of diversion/withdrawal
- ☐ Add point(s) of diversion/withdrawal
- ☒ Change/transfer place of use
- ☐ Other (i.e. consolidation, intertie, trust water)

Explain: _____

FOR OFFICE USE ONLY	
CHANGE No. <u>CS4-05216sb5a</u>	WRIA <u>39</u>
DATE ACCEPTED <u>11/09/11</u>	BY <u>[Signature]</u>
FEE \$ <u>[Signature]</u>	REC'D <u>09/29/2011</u>
CHECK No. <u>[Signature]</u>	
ECY Coding: 001-002-WR10285-000011	
SEPA: <input type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME George and Diane Burchak	PHONE NO. (509) 674-5479	FAX NO. ()
ADDRESS 1941 Mohar Road		
CITY Cle Elum	STATE WA	ZIP CODE 98922
CONTACT NAME (IF DIFFERENT FROM ABOVE) Jeff Slothower	PHONE NO. (509) 925-6916	FAX NO. (509) 962-8093
Lathrop, Winbauer, Harrel, Slothower & Denison L.L.P.		
ADDRESS P.O. Box 1088		
CITY Ellensburg	STATE WA	ZIP CODE 98926
LEGAL LAND OWNER or PART OWNER NAME OF PROPOSED PLACE OF USE	PHONE NO. ()	FAX NO. ()
ADDRESS		
CITY	STATE	ZIP CODE

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER 05216	RECORDED NAME(S) George Burchak and Diane Burchak
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

CS4-05216sb5a

FOR OFFICE USE ONLY			
APP. NO. <u>34-83327-J COURT CLAIM 05216</u>	PERMIT NO. _____	CERT. NO. _____	CERT. OF CHANGE NO. _____
<u>SUB J ELK HEIGHTS</u>			
<u>08-01-1887</u>			
<u>KITT-11-10</u>			

ORIGINAL

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Iron Mountain Creek, a tributary of the Yakima River		SW	NE	9	19	15		

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
<u>Irrigation of 50 Acres, domestic supply and stock water:</u> Iron Mountain Creek, a tributary of the Yakima River		SW	NE	9	19	15		
<u>Instream flow for water banking:</u> Does not apply because the water will not be diverted								

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☐ YES ☐ NO PROPOSED: ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 60 acres	1.97 cfs	720	April 1 to October 31
Domestic supply	0.02 cfs	2	Continuous
Stock water	0.01 cfs	2	Continuous

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 50 acres	1.64 cfs	600	April 1 to October 31
Instream flow to create a trust water right for water banking purposes	0.33 cfs	120	April 1 to October 31
Domestic supply	0.02 cfs	2	Continuous
Stock water	0.01 cfs	2	Continuous

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:

W½ SE¼ and NE¼ SE¼ of Section 4, T. 19 N., R. 15 E.W.M.

¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
	SE	4	19	15	Kittitas		

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:

Irrigation of 50 Acres, domestic supply and stock water:
W½ SE¼ and NE¼ SE¼ of Section 4, T. 19 N., R. 15 E.W.M.

Instream flow for water banking:

Primary Reach A: Point of Diversion to confluence of Iron Mountain Creek and Tillman Creek

Primary Reach B: Confluence of Tillman Creek to the Yakima River

Secondary Reach: End of Primary Reach A to the confluence of the Yakima and Columbia Rivers

1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☐ YES ☒ NO – IF NO, PROVIDE OWNER(S) NAME:
Unknown

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
☐ YES ☒ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

IF FOR SEASONAL OR TEMPORARY, START DATE ____/____/____ END DATE ____/____/____


Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

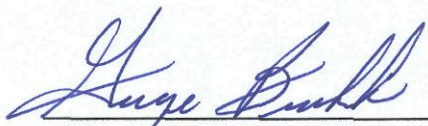
Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.


7. Signatures:

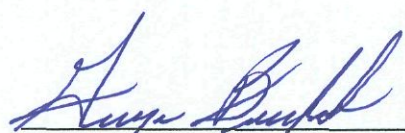
I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.



(Applicant Signature)

 9/16/11
(Applicant Signature) (Date)


(Water Right Holder)

 9/16/11
(Water Right Holder) (Date)


(Land Owner(s) of Proposed Place of Use)

 9/16/11
(Land Owner(s) of Proposed Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
☐ OTHER/EXPLANATION: _____

STAFF: _____ **DATE:** ____/____/____